PARTIAL RESECTION OF UPPER AND LOWER MAXILLÆ FOR CONGENITAL DEFORMITY OF THE FACE.

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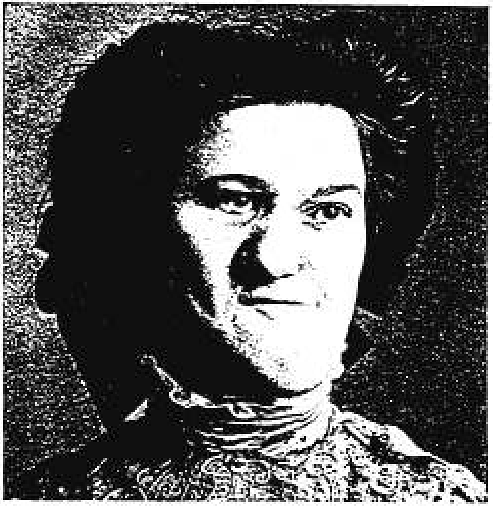
MISS H. L. F., 22 years of age, came under my care at the Post-Graduate Hospital in New York, on November 22, 1905. Figure 1, from a photograph taken before operation, gives a general idea of the facial deformity. The photographer was not given special instructions, and obtained artistic effects, partially disguising the prognathous mandible, and leaving the deformed ears hidden. A detailed description of the deformities with a view to accuracy of report, would make tedious reading, and I will give salient points only.

The left superior maxilla was hypertrophic, and the right superior maxilla was atrophic. Teeth irregularly disposed. Nasal and lachrymal bones, vomer and vertical plate of the ethmoid bone had adapted themselves in development to correspond with the deformities of the superior maxillæ.

Mandible markedly hypertrophic and prognathous, projecting more than an inch in advance of its normal frontal line, making speech difficult and closure of the mouth impossible. Left mandibular body larger than the right one, and both of them about double normal breadth and thickness. Teeth irregularly disposed. The tip of the large nose was fairly below the right orbit, and the tip of the bulky chin was fairly below the left orbit. The external ears consisted of little more than concha, antihelix and lobe, and they stood out at right angles to the head.

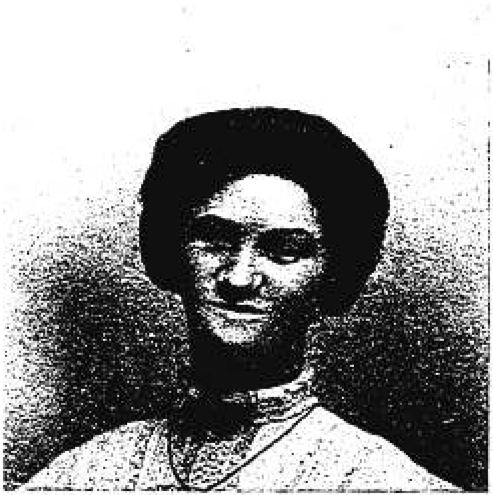
First Operation.—Preliminary tracheotomy, for anesthesia, and to allow packing of the pharynx. Incision within the mouth along alveolar border. Soft parts separated from the superior maxillæ, with care to avoid injury of the lachrymal ducts. Vomer cut away from the hard palate with a thin sharp chisel. Larger part of the left superior maxilla, including part of the orbital plate and alveolus with several teeth, removed with the chisel.

FIG. 1.



Congenital deformity of the bones of the face.

FIG. 2.



Showing result after partial resection of upper and lower jaws.

A small external opening at the root of the nose allowed entrance of a narrow chisel that was used for loosening the nasal and lachrymal attachments. The loosened nose structures were then swung into the space previously occupied by the left maxillary sinus, and held in place with compresses. One week later it was thought best to remove a little more of the orbital plate (operating through the mouth). Healing of the extensive wound surfaces occurred without special incident.

Second Operation.—A segment of mandible fully three inches in length and carrying several teeth was excised. The segment included the symphysis menti, and considerable more of the right body than of the left one. Excision of the segment was begun with Gigli saws but completed with the chisel, as the hypertrophic bone was eburnated and it broke the saws. The remaining portions of mandible were brought together in the middle line and sutured with silver wire. This operation, like the first one, was done within the mouth. Repair was conducted without complications. The second part of the operation carried the point of the chin to the middle line of the face and in good line with the nose. The ponderous mass of soft tissues composing the chin and lower lip did not contract enough to give symmetry of contour to the face, and about six months later I cut out the superfluous soft parts and managed to shape the lip and chin rather prettily. At the same time the protruding ears were set back by the method which we commonly employ for protuberant ears. A segment of skin and cartilage was removed from the posterior part of each ear, and the cut surface was made to fit against a corresponding area above each mastoid process. The operative work in this case has resulted in giving excellent facial lines. The mouth can be closed normally, and improvement of speech began very soon after the removal of the segment of hypertrophic mandible. Figure 2, from a second photograph taken recently, gives a good view of the present condition of face structures.